

May 27, 2022

Rick Shien, Chief  
Hazardous Waste Bureau  
New Mexico Environment Department  
2905 Rodeo Park Drive  
Santa Fe, NM 87505

**RE: Response to Second Disapproval 2019 Financial Assurance Submittal – Advanced Chemical Treatment, Inc. EPA ID# NMD002208627 – HWB-ACT-MISC**

**Dear Mr. Shien:**

Advanced Chemical Treatment, Inc. (ACTreatment) would like to respond to the second disapproval of the 2019 Financial Assurance Submittal.

Below you will find a summary of comments along with our response and follow-up.

1. In the February 2, 2022, e-mail, the Permittee asked NMED if they should be preparing annual estimates. The Permittee is required to submit annual financial assurance and cost estimate documents in accordance with their effective RCRA Container Storage Facility Operating Permit Sections II.N (Cost Estimate for Facility Closure) and 11.0 (Financial Assurance for Facility Closure). However, since NMED and the Permittee have been working toward correcting the 2019 Financial Assurance submittal, the Permittee will not be required to submit the 2020 or 2021 Financial Assurance submittals. To satisfy the requirements for the 2020 and 2021 Financial Assurance submittals, the Permittee must address and incorporate NMED's comments from the October 2019 Disapproval and this second disapproval in the 2022 Financial Assurance submittal.

***The Facility has addressed and incorporated NMED's comments from the October 2019 Disapproval and this second disapproval in to the 2022 Financial Assurance Submittal. It is submitted as Attachment A to this NOD response.***

2. Comment 2 from the October 2, 2019 Disapproval letter for the 2019 Financial Assurance Submittal required the Permittee to "[e]xplain why the full amount of the maximum underwriting limitation was not utilized for the performance bond." The Permittee's Response to Comment 2 states "[w]e agree that the US Treasury Department issues Circular 570 listing the underwriting limitation values for any give surety, however, this amount has nothing to do with the amount of authority given to our agent by the surety as their agent with Power of Attorney. It should be noted that our agent has Power of Attorney authority up to \$60,000,000 and the bond in question has a limit of less than \$500,000. Could you please explain the concern or question?" NMED's Comment 2 was a was an observation made during the review of the 2019 financial assurance submittal. NMED wanted to know why the amount reported in the Circular 570 listing did not match the amount provided in the performance bond. NMED has discussed the situation with



EPA and was informed that there was no concern with the reported amounts from the Circular 570 and performance bond not matching up. No response required.

***N/A no response required***

3. Comment 4 from the October 2019 Disapproval letter requires the Permittee to provide a Corporate Seal on the signature page of the "Corporate Surety(ies)" in accordance with 40 CFR 264.151(c). The Permittee provided a revised Performance Bond with a Corporate Seal; however, the Corporate Seal was still missing from the signature page of the "Corporate Surety(ies)." The Permittee must include a Corporate Seal where it has been written in the wording of the mechanism. Furthermore, failure to include a Corporate Seal renders the document(s) invalid and will result in additional disapproval letters of the financial assurance submittal. Ensure all documents include a Corporate Seal where it has been written in the wording of the mechanism.

***The performance bond DOES include the Corporate Seal in accordance with 40 CFR 264.151(c). It is embossed seal with NO ink so it is often difficult to see on a copy but is clearly visible on the original, you can faintly see that it is right over the typed words on the bottom left where it says Corporate Seal and the Bond Premium. It is also on the POA document. It is faint and underneath the hand-written date between the POA and expiration and ink corporate seal.***

4. Comment 5 from the October 2, 2019 Disapproval letter required the Permittee to identify the total penal sum for closure activities only. According to the Permittee, the "Standby Trust Balance Sheet has been updated to remove the word 'post'," however, the Permittee did not provide an updated copy of the Standby Trust Balance Sheet. Ensure updated and revised copies of documents are included in all future responses.

***The revised performance Standby Trust Balance Sheet and is part of the in the 2022 financial assurance submittal as Attachment A.***

5. Comments 6 and 9 from the October 2, 2019, Disapproval letter required the Permittee to clarify the discrepancy between the closure cost estimate, \$235,088.61 (in 2011 Dollars), reported in the Schedule A document from the original August 20, 2019 Financial Assurance submittal and Appendix D (Closure Cost Estimate) which reported \$457,178 (in 2017 Dollars). Please address the following comments:

- a. Explain why two values were reported, one reported in 2011 Dollars and the other reported in 2017 Dollars, in the original submittal.

***The closure cost estimate of \$235,088.61 in Schedule A was a page from the original standby trust agreement entered into as of October 6, 2011, between Advanced Chemical Treatment and Comerica Bank. It was not submitted as an official 'Schedule A' but was simply an attachment to the standby trust agreement.***



- b. The response to Comment 6 states that the "Schedule A has been updated to reflect the closure cost in 2020 dollars." However, the cost estimate was not provided for the 2020 cost estimate, and it appears that the 2020 cost estimate value is the same as the 2017 cost estimate. Provide the updated cost estimate for the 2022 Financial Assurance submittal in 2021 dollars and explain why the 2020 cost estimate value was the same as the 2017 cost estimate.

***The cost estimate has been revised as such:***

	2017	2018	2019	2020	2021
Gross domestic product	107.710	110.296	112.265	113.625	118.370
Amount	\$451,178	\$462,845.46	\$472,260.61	477,865.18	499,273.57

- c. In Attachment C (Schedule A), the Permittee must also include the "Date of Estimate", so the NMED is aware of when the cost estimate was last updated and in terms of what year of the current dollars.

***The date of estimate is now included in Schedule A and is part of the in the 2022 financial assurance submittal as Attachment A.***

6. Comment 8 from the October 2, 2019 Disapproval letter required the Permittee to provide both the letter of credit and letter by the owner/operator. The Permittee states "ACT is not requesting to utilize a letter of credit to satisfy the requirements but rather is choosing to use a Surety Bond (Performance Bond) to satisfy the financial assurance requirements in conjunction with the Standby Trust Fund in accordance with the requirements of 264.143(b). Therefore, this regulation is not applicable." There appears to be a misunderstanding with interpreting which regulations apply to the financial assurance submittal. NMED agrees that the requirements for 40 CFR 264.43(b) are not applicable because the Permittee is not utilizing a letter of credit. However, the reference to 40 CFR.143(b) is also not correct because that reference lists the requirements for a financial guarantee or payment bond. The Permittee has submitted a Performance Bond and therefore are subject to the requirements of 40 CFR 264.143(c).

***ACT acknowledges the above comment and agrees that we are subject to the requirements of 40 CFR 264.143(c).***

7. Comment 12 from the October 2, 2019, Disapproval letter required the Permittee to provide the property information in the Schedule B document of the revised 2019 Financial Assurance submittal. The Permittee provided a revised Schedule B, but the format of the new document was not correct and the property information was not provided. The "property" in question is defined as the "assets held in trust." Therefore, in order to satisfy the requirements of 40 CFR 264.151(a)(1), Section 3 (Establishment of Fund), the Permittee must provide the amount of the trust and the trust fund account number. NMED has provided a sample Schedule B that should satisfy the requirements of 40 CFR 264.151(a)(1), Section 3. Since the Permittee does not utilize a Letter of Credit, the item that mentions the "Type of mechanism(s)



that will be deposited" can be stated as "Not Applicable." Use the attached sample Schedule B for the 2022 financial assurance submittal as an example.

***ACT acknowledges the above comment and has included Schedule B in the 2022 financial assurance submittal as Attachment A.***

8. In the 2019 Financial Assurance submittal, the Permittee provided a Closure Cost Estimate in terms of 2017 dollars. Explain how all the values in the cost estimate table were generated (e.g., use CostPro software). An example would be the cost per unit for each activity. Update to cost estimate to 2021 dollars.

***The 2017 cost estimate was calculated and certified by a NM PE from DBS&A Engineering. As required in 40 CFR Part 264.142(a)(2), the CCE is based on 2017 dollars for the costs of hiring a third party to close the CSF. The CCE was prepared by and sealed by a professional engineer employed directly by DBS&A and estimated using market research.***

Regards,

A handwritten signature in black ink, appearing to read "Pasquale Paduano", written in a cursive style.

Pasquale Paduano  
Vice President TSDF  
ACTenviro

Enclosures

cc: K. Harsono, Compliance Director, ACTenviro



**Attachment A – 2022 Financial Assurance Submittal**

T 505.349.5220  
F 505.344.7986

6137 Edith Boulevard NE, Albuquerque, NM 87107  
[www.ACTenviro.com](http://www.ACTenviro.com)

Advanced Chemical Treatment  
EPA ID# NMD002208627 – HWB-ACT-MISC  
Adjusted Closure Cost Estimate from 2017-2021

NIPA Table 1.1.9<sup>1</sup>

	2017	2018	2019	2020	2021
1. Gross domestic product	107.710	110.296	112.265	113.625	118.370
2. Amount	\$451,178	462,845.46	472,260.61	477,865.18	499,273.57

1. Derived from Annual Implicit Price Deflator (IPD) for Gross Domestic Product as published in the U.S. Department of Commerce in its Survey of Current Business

<https://apps.bea.gov/iTable/iTable.cfm?reqid=19&step=2#reqid=19&step=2&isuri=1&1921=survey>

2. Closure Cost Estimate provided by ACT in 2017 based on 2016 value. 2016 IPD value is used to adjust to 2020 values.

## Schedule A

### Identification of Facilities and Cost Estimates

EPA Identification Number	NMD002208627
Name	Advanced Chemical Treatment, Inc.
Address	6133 Edith Blvd., NE Albuquerque, NM 87107
Closure Cost Estimate	\$499,273.57
Date of Estimate	May 15, 2022

## Schedule B

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**Account Information:**

Account Number assigned to this Trust Agreement                    3085004335

Amount of Deposit into this standby Trust Agreement             \$471,873.30

Type of mechanism(s) that will be deposited into this account if applicable:

Letter of Credit #    \_\_\_\_\_

**Bank/Branch location of the Trustee for this Trust Agreement**

Bank/Branch name	Comerica Bank
Location Address	411 W. Lafayette Blvd., 4th Floor, Detroit
City & State	MI 48226

**Contact Person at Bank who will be responsible for information/questions regarding this Standby Trust Agreement:**

Name	Saquanda Nalls
Title	Administrative Officer
Phone No.	313-222-8708 Ext.2-8708





INCREASE RIDER

To be attached to and form part of Performance Bond No. 800049265 issued by Atlantic Specialty Insurance Company the Surety on behalf of Advanced Chemical Treatment, Inc. as Principal in favor of the U.S. Environmental Protection Agency (hereinafter called EPA) said bond having been issued in the amount of (\$ 457,178.00 ) effective from the 12th day of August, 2019.

It is hereby understood and agreed the amount of the aforesaid bond is hereby increased from Four Hundred Fifty Seven Thousand, One Hundred Seventy Eight Dollars and Zero Cents (\$ 457,178.00 ) to Four Hundred Ninety Nine Thousand, Two Hundred Seventy Three and Fifty Seven Cents (\$ 499,273.57 ) effective as of the 26th day of April, 2022.

Provided, however, the liability of the Surety for defaults occurring prior to the 26th day of April, 2022 shall not exceed (\$ 457,178.00 ) and the total liability of the Surety shall in no event exceed (\$ 499,273.57 ).

Signed, sealed and dated this 27th day of April, 2022.

Witness signature line with handwritten signature of Nancy J. J...

Advanced Chemical Treatment, Inc. BY: [Signature] Principal [Circular Seal: ADVANCED CHEMICAL TREATMENT INC. CORPORATE SEAL 6/24/2011 New Mexico]

ITS: \_\_\_\_\_

Witness signature line with handwritten signature of Julie A. Rector. Julie A. Rector

Atlantic Specialty Insurance Company BY: [Signature] Attorney-In-Fact Dean Sigmundson [Circular Seal: ATLANTIC SPECIALTY INSURANCE COMPANY CORPORATE SEAL 1986 NEW YORK]



# Power of Attorney

KNOW ALL MEN BY THESE PRESENTS, that ATLANTIC SPECIALTY INSURANCE COMPANY, a New York corporation with its principal office in Plymouth, Minnesota, does hereby constitute and appoint: **Charles Massie, Dean Sigmundson, David W. Massie**, each individually if there be more than one named, its true and lawful Attorney-in-Fact, to make, execute, seal and deliver, for and on its behalf as surety, any and all bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof; provided that no bond or undertaking executed under this authority shall exceed in amount the sum of: **unlimited** and the execution of such bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof in pursuance of these presents, shall be as binding upon said Company as if they had been fully signed by an authorized officer of the Company and sealed with the Company seal. This Power of Attorney is made and executed by authority of the following resolutions adopted by the Board of Directors of ATLANTIC SPECIALTY INSURANCE COMPANY on the twenty-fifth day of September, 2012:

Resolved: That the President, any Senior Vice President or Vice-President (each an "Authorized Officer") may execute for and in behalf of the Company any and all bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof, and affix the seal of the Company thereto; and that the Authorized Officer may appoint and authorize an Attorney-in-Fact to execute on behalf of the Company any and all such instruments and to affix the Company seal thereto; and that the Authorized Officer may at any time remove any such Attorney-in-Fact and revoke all power and authority given to any such Attorney-in-Fact.

Resolved: That the Attorney-in-Fact may be given full power and authority to execute for and in the name and on behalf of the Company any and all bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof, and any such instrument executed by any such Attorney-in-Fact shall be as binding upon the Company as if signed and sealed by an Authorized Officer and, further, the Attorney-in-Fact is hereby authorized to verify any affidavit required to be attached to bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof.

This power of attorney is signed and sealed by facsimile under the authority of the following Resolution adopted by the Board of Directors of ATLANTIC SPECIALTY INSURANCE COMPANY on the twenty-fifth day of September, 2012:

Resolved: That the signature of an Authorized Officer, the signature of the Secretary or the Assistant Secretary, and the Company seal may be affixed by facsimile to any power of attorney or to any certificate relating thereto appointing an Attorney-in-Fact for purposes only of executing and sealing any bond, undertaking, recognizance or other written obligation in the nature thereof, and any such signature and seal where so used, being hereby adopted by the Company as the original signature of such officer and the original seal of the Company, to be valid and binding upon the Company with the same force and effect as though manually affixed.

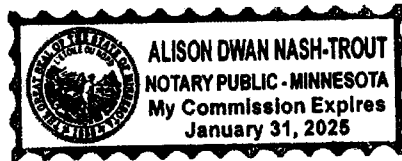
IN WITNESS WHEREOF, ATLANTIC SPECIALTY INSURANCE COMPANY has caused these presents to be signed by an Authorized Officer and the seal of the Company to be affixed this twenty-seventh day of April, 2020.



By *Paul J. Brehm*  
Paul J. Brehm, Senior Vice President

STATE OF MINNESOTA  
HENNEPIN COUNTY

On this twenty-seventh day of April, 2020, before me personally came Paul J. Brehm, Senior Vice President of ATLANTIC SPECIALTY INSURANCE COMPANY, to me personally known to be the individual and officer described in and who executed the preceding instrument, and he acknowledged the execution of the same, and being by me duly sworn, that he is the said officer of the Company aforesaid, and that the seal affixed to the preceding instrument is the seal of said Company and that the said seal and the signature as such officer was duly affixed and subscribed to the said instrument by the authority and at the direction of the Company.



*Alison Nash-Trout*  
Notary Public

I, the undersigned, Secretary of ATLANTIC SPECIALTY INSURANCE COMPANY, a New York Corporation, do hereby certify that the foregoing power of attorney is in full force and has not been revoked, and the resolutions set forth above are now in force.

Signed and sealed. Dated 27th day of April, 2022.



*Kara Barrow*  
Kara Barrow, Secretary

This Power of Attorney expires  
January 31, 2025

**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**

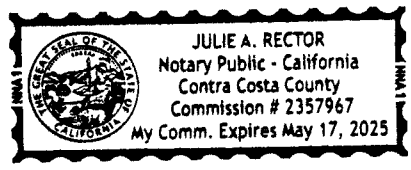
**CIVIL CODE § 1189**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California }  
County of Contra Costa }

On April 27, 2022 before me, Julie A. Rector, Notary Public  
*Date Here Insert Name and Title of the Officer*  
personally appeared Dean Sigmundson  
*Name(s) of Signer(s)*

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



Place Notary Seal and/or Stamp Above

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature Julie A Rector  
*Signature of Notary Public*

**OPTIONAL**

Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

**Description of Attached Document**

Title or Type of Document: Bond Rider for ACT Bond #800049265  
Document Date: April 27, 2022 Number of Pages: \_\_\_\_\_  
Signer(s) Other Than Named Above: \_\_\_\_\_

**Capacity(ies) Claimed by Signer(s)**

Signer's Name: Dean Sigmundson Signer's Name: \_\_\_\_\_  
 Corporate Officer – Title(s): \_\_\_\_\_  Corporate Officer – Title(s): \_\_\_\_\_  
 Partner –  Limited  General  Partner –  Limited  General  
 Individual  Attorney in Fact  Individual  Attorney in Fact  
 Trustee  Guardian of Conservator  Trustee  Guardian of Conservator  
 Other: \_\_\_\_\_  Other: \_\_\_\_\_  
Signer is Representing: \_\_\_\_\_ Signer is Representing: \_\_\_\_\_

**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**

**CIVIL CODE § 1189**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California )

County of Santa Clara )

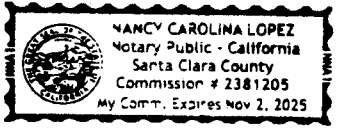
On 5/10/2022 before me, Nancy Carolina Lopez, Notary Public  
Date Here Insert Name and Title of the Officer

personally appeared Walter Hanger  
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature Nancy Lopez  
Signature of Notary Public

Place Notary Seal Above

**OPTIONAL**

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

**Description of Attached Document**

Title or Type of Document: \_\_\_\_\_  
Document Date: \_\_\_\_\_ Number of Pages: \_\_\_\_\_  
Signer(s) Other Than Named Above: \_\_\_\_\_

**Capacity(ies) Claimed by Signer(s)**

Signer's Name: \_\_\_\_\_ Signer's Name: \_\_\_\_\_  
 Corporate Officer — Title(s): \_\_\_\_\_  Corporate Officer — Title(s): \_\_\_\_\_  
 Partner —  Limited  General  Partner —  Limited  General  
 Individual  Attorney in Fact  Individual  Attorney in Fact  
 Trustee  Guardian or Conservator  Trustee  Guardian or Conservator  
 Other: \_\_\_\_\_  Other: \_\_\_\_\_  
Signer Is Representing: \_\_\_\_\_ Signer Is Representing: \_\_\_\_\_

PERFORMANCE BOND

Duplicate Original

Date bond executed: June 8, 2021

Effective date: August 12, 2019

Principal: Advanced Chemical Treatment, Inc., 6137 Edith Blvd. NE, Albuquerque, NM 87107

Type of organization: Corporation

State of incorporation: New Mexico

Surety(ies): Atlantic Specialty Insurance Company, One State Street Plaza, Floor 31, New York, NY 10004

EPA Identification Number, name, address, and closure and/or post-closure amount(s) for each facility guaranteed by this bond [indicate closure and post-closure amounts separately]: EPA Identification Number NMD002208627, Advanced Chemical Treatment, Inc., 6137 Edith Blvd. NE, Albuquerque, NM 87107, Closure Amount \$457,178.

Total penal sum of bond: \$457,178

Surety's bond number: 800049265

Know All Persons By These Presents, That we, the Principal and Surety(ies) hereto are firmly bound to the U.S. Environmental Protection Agency (hereinafter called EPA), in the above penal sum for the payment of which we bind ourselves, our heirs, executors, administrators, successors, and assigns jointly and severally; provided that, where the Surety(ies) are corporations acting as co-sureties, we, the Sureties, bind ourselves in such sum "jointly and severally" only for the purpose of allowing a joint action or actions against any or all of us, and for all other purposes each Surety binds itself, jointly and severally with the Principal, for the payment of such sum only as is set forth opposite the name of such Surety, but if no limit of liability is indicated, the limit of liability shall be the full amount of the penal sum.

Whereas said Principal is required, under the Resource Conservation and Recovery Act as amended (RCRA), to have a permit in order to own or operate each hazardous waste management facility identified above, and

Whereas said Principal is required to provide financial assurance for closure, or closure and post-closure care, as a condition of the permit, and

Whereas said Principal shall establish a standby trust fund as is required when a surety bond is used to provide such financial assurance;

Now, Therefore, the conditions of this obligation are such that if the Principal shall faithfully perform closure, whenever required to do so, of each facility for which this bond guarantees closure, in accordance with the closure plan and other requirements of the permit as such plan and permit may be amended, pursuant to all applicable laws, statutes, rules, and regulations, as such laws, statutes, rules, and regulations may be amended,

And, if the Principal shall faithfully perform post-closure care of each facility for which this bond guarantees post-closure care, in accordance with the post-closure plan and other requirements of the permit, as such plan and permit may be amended, pursuant to all applicable laws, statutes, rules, and regulations, as such laws, statutes, rules, and regulations may be amended,

Or, if the Principal shall provide alternate financial assurance as specified in subpart H of 40 CFR part 264, and obtain the EPA Regional Administrator's written approval of such assurance, within 90 days after the date notice of cancellation is received by both the Principal and the EPA Regional Administrator(s) from the Surety(ies), then this obligation shall be null and void, otherwise it is to remain in full force and effect.

The Surety(ies) shall become liable on this bond obligation only when the Principal has failed to fulfill the conditions described above.

Upon notification by an EPA Regional Administrator that the Principal has been found in violation of the closure requirements of 40 CFR part 264, for a facility for which this bond guarantees performance of closure, the Surety(ies)

shall either perform closure in accordance with the closure plan and other permit requirements or place the closure amount guaranteed for the facility into the standby trust fund as directed by the EPA Regional Administrator.

Upon notification by an EPA Regional Administrator that the Principal has been found in violation of the post-closure requirements of 40 CFR part 264 for a facility for which this bond guarantees performance of post-closure care, the Surety(ies) shall either perform post-closure care in accordance with the post-closure plan and other permit requirements or place the post-closure amount guaranteed for the facility into the standby trust fund as directed by the EPA Regional Administrator.

Upon notification by an EPA Regional Administrator that the Principal has failed to provide alternate financial assurance as specified in subpart H of 40 CFR part 264, and obtain written approval of such assurance from the EPA Regional Administrator(s) during the 90 days following receipt by both the Principal and the EPA Regional Administrator(s) of a notice of cancellation of the bond, the Surety(ies) shall place funds in the amount guaranteed for the facility(ies) into the standby trust fund as directed by the EPA Regional Administrator.

The surety(ies) hereby waive(s) notification of amendments to closure plans, permits, applicable laws, statutes, rules, and regulations and agrees that no such amendment shall in any way alleviate its (their) obligation on this bond.

The liability of the Surety(ies) shall not be discharged by any payment or succession of payments hereunder, unless and until such payment or payments shall amount in the aggregate to the penal sum of the bond, but in no event shall the obligation of the Surety(ies) hereunder exceed the amount of said penal sum.

The Surety(ies) may cancel the bond by sending notice of cancellation by certified mail to the owner or operator and to the EPA Regional Administrator(s) for the Region(s) in which the facility(ies) is (are) located, provided, however, that cancellation shall not occur during the 120 days beginning on the date of receipt of the notice of cancellation by both the Principal and the EPA Regional Administrator(s), as evidenced by the return receipts.

The principal may terminate this bond by sending written notice to the Surety(ies), provided, however, that no such notice shall become effective until the Surety(ies) receive(s) written authorization for termination of the bond by the EPA Regional Administrator(s) of the EPA Region(s) in which the bonded facility(ies) is (are) located.

Principal and Surety(ies) hereby agree to adjust the penal sum of the bond yearly so that it guarantees a new closure and/or post-closure amount, provided that the penal sum does not increase by more than 20 percent in any one year, and no decrease in the penal sum takes place without the written permission of the EPA Regional Administrator(s).

In Witness Whereof, The Principal and Surety(ies) have executed this Performance Bond and have affixed their seals on the date set forth above.

The persons whose signatures appear below hereby certify that they are authorized to execute this surety bond on behalf of the Principal and Surety(ies) and that the wording of this surety bond is identical to the wording specified in 40 CFR 264.151(c) as such regulation was constituted on the date this bond was executed.

Signature(s): Walt Eng Principal

Advanced Chemical Treatment, Inc.

Title(s): President

[Corporate seal]



Corporate Surety(ies)

Atlantic Specialty Insurance Company, One State Street Plaza, Floor 31, New York, NY 10004

State of incorporation: New York

Liability limit: \$60,000,000

Signature(s): Dean Sigurdson

Dean Sigurdson, Attorney-In-Fact

[Corporate seal]

[For every co-surety, provide signature(s), corporate seal, and other information in the same manner as for Surety above.]

Bond premium: \$9,144





# Power of Attorney

KNOW ALL MEN BY THESE PRESENTS, that ATLANTIC SPECIALTY INSURANCE COMPANY, a New York corporation with its principal office in Plymouth, Minnesota, does hereby constitute and appoint: **Charles Massie, Dean Sigmundson, David W. Massie**, each individually if there be more than one named, its true and lawful Attorney-in-Fact, to make, execute, seal and deliver, for and on its behalf as surety, any and all bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof; provided that no bond or undertaking executed under this authority shall exceed in amount the sum of: **sixty million dollars (\$60,000,000)** and the execution of such bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof in pursuance of these presents, shall be as binding upon said Company as if they had been fully signed by an authorized officer of the Company and sealed with the Company seal. This Power of Attorney is made and executed by authority of the following resolutions adopted by the Board of Directors of ATLANTIC SPECIALTY INSURANCE COMPANY on the twenty-fifth day of September, 2012:

Resolved: That the President, any Senior Vice President or Vice-President (each an "Authorized Officer") may execute for and in behalf of the Company any and all bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof, and affix the seal of the Company thereto; and that the Authorized Officer may appoint and authorize an Attorney-in-Fact to execute on behalf of the Company any and all such instruments and to affix the Company seal thereto; and that the Authorized Officer may at any time remove any such Attorney-in-Fact and revoke all power and authority given to any such Attorney-in-Fact.

Resolved: That the Attorney-in-Fact may be given full power and authority to execute for and in the name and on behalf of the Company any and all bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof, and any such instrument executed by any such Attorney-in-Fact shall be as binding upon the Company as if signed and sealed by an Authorized Officer and, further, the Attorney-in-Fact is hereby authorized to verify any affidavit required to be attached to bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof.

This power of attorney is signed and sealed by facsimile under the authority of the following Resolution adopted by the Board of Directors of ATLANTIC SPECIALTY INSURANCE COMPANY on the twenty-fifth day of September, 2012:

Resolved: That the signature of an Authorized Officer, the signature of the Secretary or the Assistant Secretary, and the Company seal may be affixed by facsimile to any power of attorney or to any certificate relating thereto appointing an Attorney-in-Fact for purposes only of executing and sealing any bond, undertaking, recognizance or other written obligation in the nature thereof, and any such signature and seal where so used, being hereby adopted by the Company as the original signature of such officer and the original seal of the Company, to be valid and binding upon the Company with the same force and effect as though manually affixed.

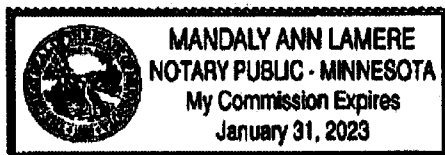
IN WITNESS WHEREOF, ATLANTIC SPECIALTY INSURANCE COMPANY has caused these presents to be signed by an Authorized Officer and the seal of the Company to be affixed this twenty-ninth day of April, 2019.



By *Paul J. Brehm*  
Paul J. Brehm, Senior Vice President

STATE OF MINNESOTA  
HENNEPIN COUNTY

On this twenty-ninth day of April, 2019, before me personally came Paul J. Brehm, Senior Vice President of ATLANTIC SPECIALTY INSURANCE COMPANY, to me personally known to be the individual and officer described in and who executed the preceding instrument, and he acknowledged the execution of the same, and being by me duly sworn, that he is the said officer of the Company aforesaid, and that the seal affixed to the preceding instrument is the seal of said Company and that the said seal and the signature as such officer was duly affixed and subscribed to the said instrument by the authority and at the direction of the Company.



*Mandaly Ann Lamere*  
Notary Public

I, the undersigned, Secretary of ATLANTIC SPECIALTY INSURANCE COMPANY, a New York Corporation, do hereby certify that the foregoing power of attorney is in full force and has not been revoked, and the resolutions set forth above are now in force.

Signed and sealed. Dated 8th day of June, 2021.



*Christopher V. Jerry*  
Christopher V. Jerry, Secretary

This Power of Attorney expires  
January 31, 2023



**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**

**CIVIL CODE § 1189**

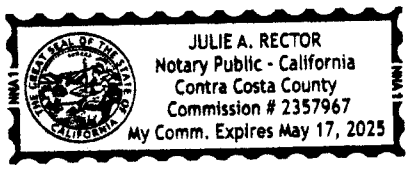
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California }  
County of Contra Costa }

On April 27, 2022 before me, Julie A. Rector, Notary Public  
*Date Here Insert Name and Title of the Officer*

personally appeared Dean Sigmundson  
*Name(s) of Signer(s)*

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature Julie A Rector  
*Signature of Notary Public*

Place Notary Seal and/or Stamp Above

**OPTIONAL**

Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

**Description of Attached Document**

Title or Type of Document: ACT Bond #800049265  
Document Date: June 8, 2021 Number of Pages: \_\_\_\_\_  
Signer(s) Other Than Named Above: \_\_\_\_\_

**Capacity(ies) Claimed by Signer(s)**

Signer's Name: Dean Sigmundson Signer's Name: \_\_\_\_\_  
 Corporate Officer – Title(s): \_\_\_\_\_  Corporate Officer – Title(s): \_\_\_\_\_  
 Partner –  Limited  General  Partner –  Limited  General  
 Individual  Attorney in Fact  Individual  Attorney in Fact  
 Trustee  Guardian of Conservator  Trustee  Guardian of Conservator  
 Other: \_\_\_\_\_  Other: \_\_\_\_\_  
Signer is Representing: \_\_\_\_\_ Signer is Representing: \_\_\_\_\_

**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**

**CIVIL CODE § 1189**

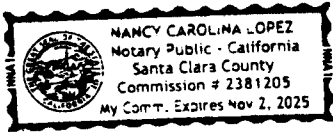
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California )  
County of Santa Clara )  
On 5/10/2022 before me, Nancy Carolina Lopez, Notary Public  
Date Here, Insert Name and Title of the Officer  
personally appeared Walter H. Singer  
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature Nancy Lopez  
Signature of Notary Public

Place Notary Seal Above

**OPTIONAL**

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

**Description of Attached Document**

Title or Type of Document: \_\_\_\_\_  
Document Date: \_\_\_\_\_ Number of Pages: \_\_\_\_\_  
Signer(s) Other Than Named Above: \_\_\_\_\_

**Capacity(ies) Claimed by Signer(s)**

Signer's Name: \_\_\_\_\_ Signer's Name: \_\_\_\_\_  
 Corporate Officer — Title(s): \_\_\_\_\_  Corporate Officer — Title(s): \_\_\_\_\_  
 Partner —  Limited  General  Partner —  Limited  General  
 Individual  Attorney in Fact  Individual  Attorney in Fact  
 Trustee  Guardian or Conservator  Trustee  Guardian or Conservator  
 Other: \_\_\_\_\_  Other: \_\_\_\_\_  
Signer Is Representing: \_\_\_\_\_ Signer Is Representing: \_\_\_\_\_



Account List  
As Of: April 19 2022  
Settled Balances

Account Number	Name	Cash	Market Value	Cost	Investment Officer	Administrative Officer
3085004335	ACT CLOSURE	\$471,873.30	\$471,873.30	\$471,873.30	DIRECTED BY CUSTOMER	SAQUANDA NALLS
<b>Totals</b>		<b>\$471,873.30</b>	<b>\$471,873.30</b>	<b>\$471,873.30</b>		